



Indiana State Department of Health

Project: Indiana State Trauma Care Committee (ISTCC)

Date: February 17, 2012 – 10:00 am

Attendance: **Committee members present:** Greg Larkin (Chair); Joe Wainscott (Vice Chair); Mike Garvey; Stephen Lanzarotti, MD; Spencer Grover, Lewis Jacobson, MD; Ryan Williams, RN; Matthew Vassy, MD; Meredith Addison, RN; Lawrence Reed, MD; Gerardo Gomez, MD; David Welsh, MD; Donald Reed, MD; Tres Scherer, MD; Chris Hartman, MD

Committee members present via phone: Scott Thomas, MD and Michael McGee, MD

Committee members not present: Gaby Iskander, MD and Keith Kahre

ISDH Staff Present: Art Logsdon; Katie Gatz; Derek Zollinger; Manda Clevenger; Julie Wirthwein and Teresa Watson

Agenda Item	Discussion	Action Needed	Action on Follow-up Items
1. Welcome and Introductions – Greg Larkin, MD, Chair	Dr. Larkin opened the meeting at 10:00 am and asked attendees to introduce themselves. Attendees participated via conference call or in-person.	N/A	N/A
2. Approval of Minutes – Greg Larkin, MD	<p>Dr. Larkin asked for corrections to the November 4, 2011 Indiana State Trauma Care Committee minutes. Hearing none, he entertained a motion for approval. On a motion by Dr. Jacobson, seconded by Spencer Grover and passed unanimously, the Committee approved the State Trauma Care Committee minutes as distributed.</p> <p>Dr. Larkin asked for corrections to the November 4, 2011 Trauma Task Force minutes. Hearing none, he entertained a motion for approval. On a motion by Dr. Hartman, seconded by Meredith Addison and passed unanimously, the Committee approved the Trauma Task Force minutes as distributed.</p>	N/A	N/A



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3. Special Recognition – Greg Larkin, MD	Dr. Larkin congratulated Meredith Addison for being named a Fellow of the National Emergency Nurses Association. There is only one other person in Indiana that has received this recognition. The Committee joined Dr. Larkin in congratulating her on this achievement.	N/A	N/A
4. Introduction of Trauma and Injury Prevention Staff - Art Logsdon, Director	Mr. Logsdon introduced two new members of his staff to the Committee members. Katie Gatz is the Trauma Registry Manager and Derek Zollinger is the Data Analyst.	N/A	N/A
5. Update from IDHS - Mike Garvey	<p>Mr. Garvey explained that prioritization of the DHS work plan is nearly complete. This document contains the 14 attributes listed in the plan which is set to be completed in May 2012. This document will be developed into a strategic plan which will include an education plan as well as funding sources. Mr. Garvey noted that legislative changes will need to occur along with this plan. He further stated that this document is directed at EMS but trauma is included as EMS is more than trauma.</p> <p>He continued that the completed draft will be presented to the EMS Committee at the May meeting and will focus on the entire EMS system in Indiana. The plan will include a three to five year strategy with goals for the future.</p> <p>He noted that data from the EMS Registry will be provided before or at the next meeting of the Indiana State Trauma Care Committee.</p> <p><u>Triage & Transport Rule</u></p> <p>Mr. Garvey stated the Triage and Transport rule reached the</p>	Data from EMS Registry will be provided to the ISTCC before or at the next meeting.	N/A



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	<p>Attorney General's Office only to be halted because no "Small Business Impact" statement was submitted with the rule. The rule was recalled to add this information and it should be effective July 1, 2012.</p> <p>A question was posed to Mr. Garvey as to whether or not this rule had been discussed with officials from Illinois. Mr. Garvey responded that the rule has been discussed with representatives from Illinois and they have issues with Indiana's reimbursement procedures. It was noted that ISDH/DHS/FSSA need to initiate discussions to rectify this situation.</p> <p>Note: There was long discussion regarding trauma care in northwest Indiana.</p> <p>Dr. Jacobson asked if this rule requires that a patient be transferred across state lines. Mr. Logsdon read the proposed rule and found no language stating or directing that a patient must be transported across state lines for care. The rule merely states that Level I and II patients must be taken to a trauma center unless 1 of 2 exceptions occurs.</p>		
6. Addressing Data Reliability & Uniformity in the Trauma Registry – Derek Zollinger	<p>Derek Zollinger stated that uniformity of data entered in the Trauma Registry will lead to more reliable data. He reported a series of mock incidents is proposed for the future and requested volunteers for the project. These incidents will include submission of all clinical documents from a trauma incident report. Mr. Zollinger also noted that he would recruit a trauma care center to use as a standard for this project.</p> <p>Dr. Lawrence Reed added that the Trauma Care Quality Improvement Process would be a great resource for this exercise as well. This process stresses accurate, consistent data be reported.</p>	Volunteers for the mock incidents project can contact Derek Zollinger at 317-233-7594 or via e-mail at dzollinger@isdh.in.gov	N/A



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	<p>Mr. Logsdon stated currently eight trauma hospitals are submitting data along with nine non-trauma hospitals.</p> <p>Mr. Logsdon also announced that a Memorandum of Understanding (MOU) had been agreed upon between the ISDH and DHS to allow DHS to share EMS data with the ISDH.</p> <p>Dr. Larkin noted that data is challenged because often software is not consistent and this causes the EMS data to be inconsistent. He asked if a group could convene to assist EMS providers to submit consistent data statewide.</p> <p>Mr. Wainscott stated that DHS has been in conversations with vendors to create software so the state can receive data properly. It was also noted the data needs to be in an aligned format to produce clean data.</p>		
7. Creating Appropriate Incentives for Hospitals to Become Trauma Centers – Art Logsdon	<p>Mr. Logsdon stated that one incentive for hospitals to become trauma centers is the new EMS rule requiring a Level I or II patient be transported to a trauma care center. He added that the other obvious incentive is money.</p> <p>It was suggested a needs assessment of Indiana's trauma system be done and this assessment could show where trauma care centers need to be located.</p> <p>A suggestion was made to have all hospitals in a designated area/region dedicate \$5K to \$10K to one specific hospital in the area so each designated area or region will be ensured of having at least one trauma care center strategically located.</p>	N/A	N/A



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	<p>Dr. Lawrence Reed stated that Palm Beach County, Florida earmarks an extra \$15 per property tax year specifically toward trauma centers.</p> <p>It was also suggested that the Indiana Hospital Association look for funding for these centers. Spencer Grover stated that his group has looked at legislation to fund trauma care – he noted there is no “legislative will”, Indiana is a “free market state” and Indiana has no Certificate of Need (CON) program.</p> <p>Joe Wainscott stated the need for everyone to communicate with their legislators is key in this battle. This process needs to begin at the grassroots level. We must show them the data and help them see the need.</p>		
8. Top-to-Bottom Review of Draft Trauma Registry Rule – Art Logsdon	Art Logsdon stated he had planned to spend the majority of the time in the meeting discussing this proposed rule. So, with time being short he opted to summarize the rule and asked that the Committee and/or interested persons with suggested additions, corrections or changes email their comments to Katie, Derek or himself.	Send comments on the proposed rule to Art Logsdon – alogsdon1@isdh.in.gov , Katie Gatz – kgatz@isdh.in.gov or Derek Zollinger – dzollinger@isdh.in.gov	N/A
9. Adjournment and Next Meeting Date – Greg Larkin, MD	<p>Dr. Larkin closed the meeting and thanked all for their time and efforts.</p> <p>The next meeting is scheduled for May 11, 2012 at 10:00 am at the ISDH building. NOTE: this meeting was originally scheduled for May 18 but has been rescheduled to May 11.</p>	N/A	N/A